

$6 \times 2 = 12$
 $2 \times 6 = 12$
 $5 \times 4 = 20$
 $7 \times 2 = 14$
 $1 \times 39 = 39$
 59

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
 (FOR USE WITH FORM PTO-875)

SERIAL NO.

10 / 554252

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		6				
8		6				
9		1				
10		1				
11	1					
12		1				
13		1				
14		1				
15	1					
16		1				
17		1				
18		2				
19		2				
20		2				
21		2				
22		2				
23	1					
24		1				
25		1				
26		1				
27		1				
28		1				
29		1				
30		7				
31		7				
32		(1)				
33		1				
34		5				
35		5				
36		5				
37		5				
38	1					
39		1				
40		1				
41		1				
42		1				
43		1				
44		1				
45		1				
46	1					
47	1					
48		2				
49		1				
50		1				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↙		↙		↙
TOTAL CLAIMS						

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		1				
52	1					
53	1					
54		1				
55						
56						
57						
58						
59						
60						
61						
62						
63						
64						
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89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	9	↓		↓		↓
TOTAL DEP.	89	↙		↙		↙
TOTAL CLAIMS	98					